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*On Sept. 26, 2010, Georgetown Municipal Light Department lineman Jim Young was severely injured in an electrical accident while on the job. Due to the severity of his injuries, he's lost both arms.*



*Jim spent eight weeks at Massachusetts General Hospital and Spaulding*

*Rehabilitation Hospital. Through perseverance, courage and the love of family and friends, Jim has made an amazing recovery.*

*There is still a long road to full recovery and many new roads for Jim to cross. As Jim moves forward, we want to show him that we support his will and determination.*

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Please join the Georgetown Municipal Light Department in support of this benefit golf tournament for our friend and colleague, Jim Young.



Georgetown Municipal Light Department  
94 Searle Street  
Georgetown, MA 01833  
978-352-5730

email: [wsnow@comcast.net](mailto:wsnow@comcast.net)

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**GEORGETOWN MUNICIPAL  
LIGHT DEPARTMENT**

**➤ Sponsors ➤**

## **The Jim Young & Family Benefit Golf Tournament**

**May 23, 2011**



**Black Swan Country Club  
258 Andover Street  
Georgetown, MA 01833**

The combination of a **great golf course,**  
**great food, great people, and a**  
**great cause** will add up to one **GREAT day!**

## registration:

**11:00 a.m. – 12:00 p.m.**

**12:00 p.m. .... Shotgun Start**

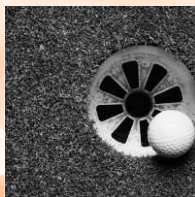
**5:30 p.m. .... Reception**

**Dinner to follow**

*Proper golf attire is required.*

Register as a participant, sponsor or dinner guest  
and/or auction item donor.

Join us for a day of fun, all for a good cause –  
our friend Jim Young and his family. All proceeds  
will benefit the family.



## entry fee includes:

- Green fees & cart
- 18-hole tournament with cart
- Four-person scramble
- Lunch
- Buffet dinner
- Prizes for the winning foursome, longest drive and closest to the pin
- "Goody" bag

## more chances to win:

- Great raffle prizes
- Putting contests
- Silent and live auctions

# entry form

**Participants \$125 per person**

<b>Player #1</b>	Name _____
	Email _____
<b>Player #2</b>	Name _____
	Email _____
<b>Player #3</b>	Name _____
	Email _____
<b>Player #4</b>	Name _____
	Email _____

*Space is limited. Entry form must be received by May 10.*

### Dinner Only\*

Name \_\_\_\_\_

Phone \_\_\_\_\_

Number Attending \_\_\_\_\_

*\*Reservations are \$30 per person.*

Registration for golf and dinner can be made by  
check and made payable to: **Friends of Jim Young.**

Please mail to:

**Friends of Jim Young**

**c/o Georgetown Municipal Light Department**

**94 Searle Street**

**Georgetown, MA 01833**

## SPONSORSHIPS NEEDED

Please indicate type of sponsorship:

- |   |         |
|---|---------|
| <input type="checkbox"/> PREMIER SPONSOR .....      | \$1,200 |
| <input type="checkbox"/> DINNER LUNCH SPONSOR ..... | \$500   |
| <input type="checkbox"/> LUNCH SPONSOR .....        | \$500   |
| <input type="checkbox"/> RAFFLE/AUCTION DONOR       |         |

*Sponsorship form attached with details.*